**Scottish Children's Reporter Administration
Minute of Information Governance Leads held on
Tuesday 23 November 2021 via Microsoft Teams**

Present:
Alistair Hogg (Chair), Donald Lamb, Janet Robertson, Kelly Campbell, Sheena Banks, Jim McClafferty, Shona Spence, Shona Carnegy (for Vicki Ritchie), Gwen McNiven, Nicola Baird, Pamela Armstrong, Angela Mitchell, Gill Short, Kerry-Ann Kean, Stephen Eodanable, Hannah Mcculloch, Joanne Donald, Gillian Henderson (until 2.45pm)

		Timescale	Action
1.	**Apologies** Paul Harkness, Ed Morrison, Helen Etchells, Vicki Ritchie. AH welcomed new members Hannah and Jo		
2.	**Any other Business** None added		
3.	**Minutes of last Meeting (24 August 2021)** Minutes agreed as being accurate with one matter arising. <u>Matters arising</u> GS – asked if we could address a potential conflict between items 2 and 3 of the previous (August) minutes. This concerns papers to be emailed to solicitors with item 2 stating 'they should always be emailed securely' and item 3 stating a flexible approach can be adopted. SE clarified that where a solicitor is in the same firm as a solicitor with a secure email address, it can be agreed to send papers to the secure email address. SE further explained that a mandate is not normally required. Written confirmation from the solicitor, which clearly states that they are instructed to act on behalf of the client is considered to be sufficient, if it is received from a CJSM account or from an email address that can be verified on the LSoS website. The guidance has been updated to reflect the increased flexibility. Receiving requests has become more flexible e.g. on solicitor's headed paper where email address can be seen. Agreed to amend previous minutes for accuracy. <u>Updates on actions from previous minutes</u> **Pastoral care notes for proof proceedings** – SE stated that the issue is now resolved. Which means less work instead of more for SCRA. GCC now use a form instead of a letter requesting information from Education. Retention of records (see item 4) Update of ND Group (see item 5) Audit of Ayrshire ND breaches (see item 6) Training (see item 9)	**Dec 21**	**GH/JD**
4.	**Retention of over 18 files on CSAS** AH – The current capability of CSAS relating to deletion of records not required to be kept, is that it is not fully available. The auto-delete function is only used in a test environment on CSAS. SE stated that there is progress being made on updating the retention policy and there will be exceptions to deleting over-18's records.		

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	A draft policy will be available prior to the next IG Leads meeting. AH – UNCRC whilst not yet implemented following the Supreme Court decision in October, is drafted such that records are likely to be retained until the subject is 19 years. There is a watching brief at present as deleting records at 18 could be open to criticism if the limit is eventually set at 19 when UNCRC is implemented. GH asked how long we would wait before applying the retention policy and AH confirmed that he was hoping for some clarity in early 2022 regarding timetable setting.	**Feb 22** **Feb 22**	**SE** **AH**
5.	**Non Disclosure Group and workstreams** AH – Less discussion in IG Leads Group due to ND focus group is a benefit. NDG are working out how to improve change to reduce risk in a safe, appropriate and compliant way. Comprises representatives from almost all localities and other relevant teams. Important, significant and impactful issue for children and families as well as staff. Range of actions include how, and by what process, decisions are made around when ND begins. ND situations and how to reduce these in light of the fact that ND isn't going away and what does, and should, this process look like. There is also a tech impact in CSAS. Gillian Brown and Myrian Lazo have been instrumental in mapping processes and Alison Deighan has worked on the options paper looking at the ND recording and notification. We need to examine if there is an appetite for change and EMT will be the ultimate decision makers on changes. Debra Bell will work on CSAS changes activity. There are four main work streams within the group: 1. Liaison and Collaboration – at national and local level 2. Practice processes and legislation e.g. recording of decisions and the complexity due to legislative rules – potential for change 3. ND approach to double-checking (particularly the envelope check stage) and breach handling (SE). Should individuals involved in the breach be included in the review process? Also considering 'Lessons learned' improvement. 4. Data – DL's team and CSAS changes Jo and Hannah will support the work from the I&R team. Discussions on these work streams then ensued. These discussions focussed around a potential conflict between the SOM and Practice Direction 4 concerning whether case note details should be written in full or where there is sufficient clarity, whether an outline would suffice. Where there is full information and specific data is not then updated, this creates an error and potential breach opportunity. If more general, information is less likely to be missed. Full information makes it easier to ascertain what is to be redacted. The 'top note' shows the last update on the system which means less need to check on updates with the Reporter. SE advocated a 'more info the better' approach and gave examples where breaches had occurred because a school name had been traced via teacher details and a case where carer details were traced on the SSSC website. This does not mean that every teachers name has to be listed as not to be disclosed, but e.g. 'anything that identifies the school'.		

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	It was concluded that there is currently flexibility in approach, and putting in full details is not contrary to Practice Direction.		
6.	**Audit of ND in Ayrshire** GH updated and thanked Ayrshire for access to the teams there. SE drafted the report and it will be finalised and circulated to this and ND groups within the next few weeks. It was very helpful to talk directly to the staff and the Ayrshire team are unlikely to be unique so it is hoped that further visits can be made to other locality teams. AH asked if other localities would want to take this up and would they find it helpful? A specific locality report was produced for the LMT and a wider report would be shared for support and reflection in order to reduce the pressure on the team and reduce risk. JR has already arranged meetings with staff to go over the report and found the report very helpful and enlightening. She would advocate meeting with GH and SE. AH believes there will be greater capacity for this now that the I&R Team have been increased. SE confirmed it was useful for the I&R Team and he would be happy to discuss potential visits to other teams. AH noted that this was a constructive offering of support and engagement and was not a blame-seeking exercise imposed on locality teams.	**Jan 22**	**SE**
7.	**Sharing information with the NHS** SE asked if any official protocols are in place re naming convention with NHS report transfer where emails used instead of mail. SC – Email notification and reports to NHS almost always by email, must get correct Health Centre. KC & JR – MOU in place. Naming convention with named recipient and Health Centre for notifications and Health Visitor reports.		
8.	**CSAS Creation of child records with no associated case work** DL – CSAS held 103 'empty' child records. This went out to localities and received 63 responses. Some duplicate records are to be deleted with records created in error for a number of reasons. These were user errors and those records should not be on the system. Several attendees gave indications of what errors can be made. Reasons included; records created in advance of PF confirmation and then when PF did confirm, they were created a second time, incidents of new staff creating sibling records where siblings were not referred. There is a 'child with similar name/ dob' warning but it can just be ignored. JR specifically asked DL if there was a 'bug' in the system as she had found an erroneous record just one digit different to a correctly created record. DL asked JR to access audit trail. JM confirmed that duplicate records are not a peculiarity of CSAS and user error needs to be monitored and managed reasonably quickly to ensure better maintenance of records. DL suggested this links back to the deletion and cleaning conversations. SC noted that it is difficult to do a good clear search for existing records before creating a new record. She found this easier with CMS. It was suggested that using wild card asterisks are useful and search guidance would be useful.	**Dec 21** **Feb 22**	**JR** **AH**

		Timescale	Action
9.	**Training** GH reminded attendees that the final GDPR training of 2021 will take place on 9th December. (This item was actually heard as the first item)	**asap**	**All**
10.	**Examples of good locality practice or issues arising** None		
11.	**New risks** Permissions on CSAS – KC - Reporters are allocated to specific child or RP. Reporter wants to access case but although they are the case owner for the child/RP, they can't access to edit details or remove a ND rule 16. There is then a time delay when they contact mailbox to request permissions. In the meantime, the system is locked and the update delayed. There can be breaches within those couple of days between the updating of the records (SE). This seems to be a CSAS issue and should be fed back to Debra Bell. Data Quality – DL - Completion and consistency of RoP on CSAS. In CSAS there are two areas in the record of proceedings where decisions on grounds are recorded; Hearing decisions and Hearing grounds. Discovered that in a number of cases, the Hearing decisions are filled in but the Hearing ground outcomes aren't. There is meant to be system logic which prevents this happening but it does not seem to be working. DL looking to highlight and understand issue and raise localities awareness. Examples of this issue were offered by SS, K-A K, JR. The RoP can't be closed off until the decision is put against the ground. A warning does pop up but wasn't there in early CSAS. Not all Reporters are completing the outcomes field which prevents staff completing their work. Workarounds were found instead of addressing original recording issue. Legacy issues from the migration from CMS had also arisen. SC noted an 'a' and 'z' ground in the record of a new child which has been dealt with. DL agrees there is a level of risk where RoPs are not completed. SS also noted a data cleansing need e.g. the number of witnesses has to be done via the mailbox. AH asked if this issue was large enough to require action. Further enquiry is needed to determine if action is required, or just monitoring and fixing these errors as they arise. October breaches Can be shared with localities.	 AH Feb 22	 DL
	Date of Next Meeting (proposed but not agreed at meeting) **Tuesday 22 February 2022 – via Microsoft Teams @ 13:30** AH thanked everyone for attending the meeting.		